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Complete and send to	his form, together wi	th applicable f	ee(s), to: <u>Mail</u> or <u>Fax</u>	Mail Stop ISSUE Commissioner for P.O. Box 1450 Alexandria, Virg (703) 746-4000	r Patents	
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APPLICATION NO.	FILING DATE	FIRST NAMED INV		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	YSTEM AND METHOD FO			NCY BASED PROPERTY PUBLICATION FEE	SYSTEM WITH COALES TOTAL FEE(S) DUE	OCING DATE DUE
APPLN. TYPE	SMALL ENTITY	ISSUE F			L	
nonprovisional	NO	XXXX	\$ \$1,400	\$0	XXXX \$1,4	00 01/05/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS		
DAS, CHAMELI		2122		717-108000		tensen O'Connor
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicated PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	tion (or "Fee Address" Indictor more recent) attached. Us DRESIDENCE DATA TO Est an assignee is identified by 137 CFR 3.11. Completion	Correspondence ation form e of a Customer BE PRINTED ON Telow, no assignee of this form is NO	or agents OR, a (2) the name of registered attorn 2 registered pat listed, no name THE PATENT (pridata will appear of a substitute for fit) (2) RESIDENCE: (Co	a single firm (having as a ney or agent) and the nament attorneys or agents. If will be printed.	member a es of up to no name is 3ee is identified below, the	document has been filed for
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The Director of the USPTO	ublication Fee (if required) v	ue Fee and Publica	tion Fee (if any) or	to re-apply any previous?	LL ENTITY status. See 37 (y paid issue fee to the applic stered attorney or agent; or	
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Typed or printed name _	Mauricio A. U	ribe		Registration	16 206	
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